

COMMUNITY SERVICE APPLICATION

NAME:		E-MAIL ADDRESS:			
HOME ADDRESS:					
	STREET	CITY	STATE	ZIP CODE	
HOME PHONE:	BUSINESS PHONE:		CELL PH	CELL PHONE:	
BOARD, COMMITTEE, OR	COMMISSION FOR WHICH	YOU ARE APPLYING:			
CURRENT OCCUPATION:_		EMPLOYER:			
WHY ARE YOU INTEREST	ED IN SERVING IN THIS POS	SITION?			
WHAT COMMUNITY ACTI	VITIES OR OTHER EXPERIE	NCE DO YOU BRING TO	THIS POSITION, INCL	UDING LEADERSHIP ROLES?	
DO YOU HAVE ANY SPEC	AL SKILLS OR EXPERTISE .	APPLICABLE TO THIS PO	OSITION?		
EDUCATIONAL/OCCUPAT	IONAL BACKGROUND:				
ARE YOU AVAILABLE FOI	R EVENING MEETINGS?	DAY	TIME MEETINGS?		
IF YES, ARE THERE ANY E	VENINGS THAT ARE UNAC	CEPTABLE?			
FOR	SOME POSITIONS :	REQUIRE CITY OF RED EASE CONTACT THE M		425-556-2101	
SIGNATURE:		DATE:			
				NE 85 th STREET, REDMOND, C	

MAIL TO: CITY OF REDMOND MAYOR'S OFFICE, 4NEX, P.O. BOX 97010, REDMOND, WA 98073-9710 O:\community service app 8/20/09